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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing  
OR  
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 901120.90011

First Named Inventor Christopher J. Hanna

**COMPLETE IF KNOWN**

Application Number 10/720,799

Filing Date November 24, 2003

Art Unit

Examiner Name

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Intelligent Medical Image Management System

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) November 24, 2003 as United States Application Number or PCT International

Application Number 10/720,799 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.


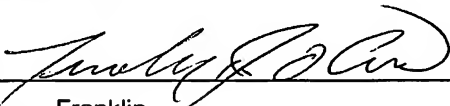
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number <span style="border: 1px solid black; padding: 2px 20px;">26710</span> OR <input checked="" type="checkbox"/> Correspondence address below			
Name <b>Barry E. Sammons</b>			
Address <b>Quarles &amp; Brady, LLP</b>			
Address <b>411 East Wisconsin Avenue</b>			
City <b>Milwaukee</b>	State <b>WI</b>	ZIP <b>53202</b>	
Country <b>USA</b>	Telephone <b>414-277-5705</b>	Fax <b>414-271-3552</b>	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <b>Christopher J.</b> (first and middle [if any])		Family Name <b>Hanna</b> or Surname	
Inventor's Signature 		Date <b>March 22, 2004</b>	
Residence: City <b>Fox Point</b>	State <b>WI</b>	Country <b>USA</b>	Citizenship <b>US</b>
Mailing Address <b>7235 North Beach Court</b>			
Mailing Address			
City <b>Fox Point</b>	State <b>WI</b>	ZIP <b>53217</b>	Country <b>USA</b>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <b>Timothy J.</b> (first and middle [if any])		Family Name <b>O'Connor</b> or Surname	
Inventor's Signature 		Date <b>3/22/04</b>	
Residence: City <b>Franklin</b>	State <b>WI</b>	Country <b>USA</b>	Citizenship <b>US</b>
Mailing Address <b>8250 South 47th Street</b>			
Mailing Address			
City <b>Franklin</b>	State <b>WI</b>	ZIP <b>53132</b>	Country <b>USA</b>
<input type="checkbox"/> Additional inventors are being named on the ____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			